

Behavioral HealthCare Inc.
155 Inverness Drive West, #201
Englewood, CO 80112
720-490-4400
Fax: 720-490-4395
www.bhicares.org

Behavioral HealthCare Inc.
155 Inverness Drive West, Suite 201
Englewood CO 80112
720-490-4400
Fax: 720-490-4395
www.bhicares.org



Focus Study Abstract

Study Topic and Goal: The intent of the focus study is to identify and address barriers to coordination of care between behavioral health and primary care providers for Medicaid consumers who are receiving BHI services.

Methodology: Three surveys, each specifically tailored to consumers, clinicians, and primary Care Providers were developed to identify barriers to coordination of care. BHI identified a random sample of Consumers and PCPs with the NCQA sample size calculator and SPSS v.15. All clinicians in the population were included in the survey mailing. Survey mailing dates were staggered, where the first set of surveys were sent on February 1, 2009 and second set were mailed March 11, 2009. The data collection period ran through April 15, 2009 and resulted in 350 returned and completed surveys. Data was then entered by BHI's Research Analyst into the Microsoft Access database specifically designed for this focus study before being transferred into SPSS V.15 for analysis. Study indicators were calculated as percentages with specifically defined numerators and denominators.

Summary and Findings: Please refer to Attachment A for detailed results. There was a trend of consumers' opinions about care coordination being slightly more positive than those of the clinicians and Primary Care Physicians who identified several barriers and dissatisfaction with the coordination of care process. This dichotomy in perceptions could indicate a need for consumer education on awareness of physical health issues, importance of obtaining medical care, and also on what consumers can expect in terms of quality and efficiency of coordination of care. It can be understood that there is indeed a very small set of Primary Care Physicians who are involved in care coordination. There is a need to discuss further details of care coordination such as whether consumers are attending medical appointments, confusion about confidentiality issues, the specific nature of information to be exchanged between medical and behavioral health providers, and a need to address specific communication issues between providers. Education and training for both behavioral and medical providers is necessary to improve coordination of care.

Conclusion and Recommendations: BHI will address barriers identified in this focus study through the new Care Coordination Model to ensure continuum of care between behavioral and medical health providers. BHI's wellness committee will develop education and training materials to increase consumer awareness for the need to obtain medical care, and for clinicians to focus on specific details of coordination of care. A BHI Mental Health Center (MHC) has designated a phone line for PCPs to access a nurse at the MHC to discuss medical and mental health issues. BHI will monitor the success of this intervention. BHI will continue discussions with Medical Managed Care Organizations (MCO) and the Department of Healthcare Policy and Financing on issues specific to education and trainings, communication and information exchange between providers as well as specific issues such as reimbursement rates.